

**OFFICE OF THE FEDERAL DEFENDER
EASTERN DISTRICT OF CALIFORNIA
801 I STREET, 3rd FLOOR
SACRAMENTO, CALIFORNIA 95814
(916) 498-5700 Fax: (916) 498-5710**

Daniel J. Broderick
Federal Defender

Linda Harter
Chief Assistant Defender

May 5, 2008

Ms. Candace A. Fry
Attorney at Law
2401 Capitol Avenue, #3A
Sacramento, CA 95816

FILED

MAY 5 2008

CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
BY DEPUTY CLERK

Re: U.S. v. Giles
Cr.S-05-125-MCE

Dear Ms. Fry:

This will confirm your appointment as counsel by the Honorable Dale A. Drozd, U.S. Magistrate Judge, to represent the above-named defendant. You are attorney of record until such time as you are relieved or other action is taken to appoint a different attorney.

Enclosed is CJA 20 form, your Order of Appointment and Voucher for services rendered. Also enclosed is an instruction sheet discussing the use of the forms.

If we may be of any further assistance regarding the processing of the enclosed form, preparation of form CJA 21 for expert services, or in reference to any other matter pertaining to this case, please feel free to call upon us at any time.

Very truly yours,


CYNTHIA L. COMPTON
Operations Administrator

:clc
Enclosures

cc: Clerk's Office

1. CIR/DIST/DIV. CODE CAE		2. PERSON REPRESENTED Giles, Shaneko		3. MAG. DKT/DEF. NUMBER		4. DIST. DKT/DEF. NUMBER 2:05-000125-005		5. APPEALS DKT/DEF. NUMBER		6. OTHER DKT. NUMBER																																																																																																																																																																																														
7. IN CASE/MATTER OF (Case Name) U.S. v. Giles				8. PAYMENT CATEGORY Felony		9. TYPE PERSON REPRESENTED Adult Defendant			10. REPRESENTATION TYPE (See Instructions) Probation Revocation																																																																																																																																																																																															
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. 1) 18 1344A.F -- BANK FRAUD																																																																																																																																																																																																								
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS FRY, CANDACE A. 2401 CAPITOL AVENUE SUITE 3A SACRAMENTO CA 95816 Telephone Number: _____						13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> R Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name: _____ Appointment Date: _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, or <input type="checkbox"/> Other (See Instructions) <u>Dale A. Fry</u> Signature of Presiding Judicial Officer or By Order of the Court <u>04/23/2008</u> Date of Order Name Pro Tunc Date Repayment or partial repayment ordered from the person represented for this service at time of appointment. <input type="checkbox"/> YES <input type="checkbox"/> NO																																																																																																																																																																																																		
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GILES

FINANCIAL AFFIDAVIT

IN THE UNITED STATES ☐ MAGISTRATE ☒ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

IN THE CASE

U.S. Giles V.S. Giles

FOR ED CA

AT Sacramento

LOCATION NUMBER
097

PERSON REPRESENTED (Show your full name)
SHANEKO GILES

- 1 ☐ Defendant - Adult
- 2 ☐ Defendant - Juvenile
- 3 ☐ Appellant
- 4 ☒ Probation Violator
- 5 ☐ Parole Violator
- 6 ☐ Habeas Petitioner
- 7 ☐ 2255 Petitioner
- 8 ☐ Material Witness
- 9 ☐ Other

DOCKET NUMBERS
Magistrate
District Court
05-125-MCE
Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box →) ☐ Felony ☐ Misdemeanor

ANSWERS TO QUESTIONS REGARDING ASSETS

ASSETS	EMPLOYMENT	Are you now <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed
		Name and address of employer: <u>The Cedar Club, S.F.</u>
		IF YES, how much do you earn per month? <u>just started - 9/07 - 12/07</u> <u>\$ 1,000/month</u> IF NO, give month and year of last employment <u>9/07 - 12/07</u>
		If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>N/A</u> IF YES, how much does your Spouse earn per month? \$ <u>N/A</u> If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ <u>N/A</u>
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES	RECEIVED <u>\$ 1,000/month</u> SOURCES <u>new mo Employee 9/07 - 12/07</u>
CASH	Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>102.00</u>	
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	IF YES, GIVE THE VALUE AND DESCRIBE IT	VALUE DESCRIPTION

DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them
	<input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	<u>0</u>	
OBLIGATIONS & DEBTS	DEBTS & MONTHLY BILLS	Creditors	Total Debt Monthly Paymt.
	(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	<u>APARTMENT OR HOME: no rent - staying with sister - pays for</u>	\$ \$
		<u>run food + trans + clothes etc)</u>	\$ \$
		<u>\$ 2,100 owing for</u>	\$ \$

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT (OR PERSON REPRESENTED)

5/23/08
Shaneke Giles